

Arizona Self-Assessment
State Education Programs for English Language Learners (ELLs)
CORRECTIVE ACTION PLAN

LEA: _____ DATE: _____

TITLE AND NUMBER OF SECTION(S) IN CORRECTIVE ACTIONS ITEMS:

ITEM TO BE COMPLETED	WHAT AND HOW (Use action verbs like develop, disseminate or train)	Person Responsible	Completion Date	EVIDENCE	ADE ONLY